re-establish for the Association the complete sequence of the file of its official publication.

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These remarks suggested themselves as a prelude to the introduction of a new column which is inaugurated in the Miscellany department of this issue, and which will appear under the caption: "Twenty-Five Years Ago."

We commend this column to our members: both old and new. It will harm none of us to know the stand colleagues who are still with us took on this, that and the other subject. And if it remind some of us who had the pleasure and honor of knowing some of the stalwarts who are no longer with us, of what was the attitude of those colleagues, now dead, on the issues of their day, that also will be good and heart satisfying.

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For member colleagues who have not been long in California, and for recent graduates from both in and out our state, the column will be worthy of perusal as showing that twenty-five years ago the California Medical Association was functioning in much the same way as at present, with equally high ideals and record of good work; and that its members of that time, in measure equal to that of today, were performing their duties in civil and hospital practice, painstakingly, alertly, and by the standards and knowledge of their day, quite as scientifically and as efficiently as we do today who still carry on, whether we be members of the this California profession a few or many years.

The Twenty-Five Years Ago Today column will not be an interpretation by the editors, of how we today view what was done then, but will be a matter-of-fact presentation by actual quotation of what our colleagues at that time felt and did. And because of such literal quotation it will be worth just that much more to all those who believe that a knowledge of the past makes for a better present and future.

THE BUBONIC PLAGUE—DOES HISTORY REPEAT ITSELF?

It is just a quarter of a century since America had its first visitation from bubonic plague. The discovery of its presence in San Francisco led to an acrimonious exchange of opinions in which state and city executives took issue with the medical societies and federal public health authorities; the two former contending that the epidemic then prevalent was not, and the two latter insisting that it was, true bubonic plague. By the march of the events which followed, the federal government and the medical societies were sustained.

Today we all know that at that time bubonic plague, that dreaded scourge of the Orient, made its appearance in California; and also that during the same period the modern-day method of attacking the disease at its dangerous source to man —the rat—was worked out.

Reference to the San Francisco outbreak is made in one or two of the paragraphs which are to be found in the Twenty-Five Years Ago column in the Miscellany department of this issue of CALIFORNIA AND WESTERN MEDICINE; and in succeeding issues further excerpts thereon will be printed in that column.

To give in this issue the word-picture of these various comments a more composite setting, and because adequate prevention measures are still being fought for, the Los Angeles outbreak of 1924 is further discussed in this issue. Articles in the Current Comment and Medical History columns of the Miscellany Department of this issue of CALIFORNIA AND WESTERN MEDICINE will shed some interesting sidelights on what recently took place in Los Angeles, and what transpired in London in the seventeenth century.

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In the intervening twenty-five years which have elapsed since the San Francisco outbreak, the cities of Oakland, California; Galveston, Texas; New Orleans, Louisiana; and Tampa, Florida, have gone through outbreaks of this much feared disease. Each of those epidemics took its toll of death among human beings, and each of those outbreaks meant not only a heavy expenditure of money in an immediate attempt to overcome the disease, but also a very large indirect loss to the commercial and other material interests of those cities, until other states in the Union and the outside world felt they could again safely carry on business relations with residents of the infected communities.

In every instance the federal authorities through the United States Public Health Service promptly went to the aid of state, county, and city health authorities to get prompt control of the epidemics, so that the other seaports in our own and foreign countries would not place an embargo on the ports of the cities just named.

Each of the above-named cities followed up its sad experience by the enactment of local ordinances designed to prevent a recurrence of such outbreaks.

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Public health authorities in our own and European countries are agreed that, after plague once establishes itself in the rodent family (especially among rats, and in California, squirrels), then in order to keep outbreaks of the disease from occurring among human beings it is necessary to keep the rodent, and especially the rat population, down to a minimum. How is this end to be most efficiently attained?

The highest authorities in the United States Public Health and Federal Biological departments are agreed that rat-trapping and rat-poisoning are only palliative measures; and that rat-proofing requirements for buildings, which prevent rats from gaining access to easy shelter and breeding and food supply places, must form the basis of all logical preventive measures against the bubonic plague.

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Not in any desire to give undue publicity to the bubonic plague outbreak in San Francisco

twenty-five years ago, or to the Los Angeles outbreak three years ago, but to permit the medical profession to go on record as in favor of rat-proofing building requirements, these comments are here made.

Perhaps in a near issue it will be possible to state that the proposed Los Angeles rat-proofing ordinance has become a law. If so, the public health interests of California will have secured an additional safeguard.

There is no physician, no matter what his specialty or calling may be, who has not a personal obligation in this. Knowledge is power. Physicians, like other humans, must know just what they are talking about. Bubonic plague in California came to us twenty-five years ago. It has come several times since that time. We may rest assured it will come again. As a matter of fact it has never been fully eradicated from the rodent population. The medical profession has definite opinions concerning this disease and how it may be prevented. This journal is an official publication of the profession, and it fulfills some of its obligations to the citizens of the state by telling what those preventive measures are. That is why the matter is discussed from different angles in this issue.

CALIFORNIA UNDERGRADUATE MEDICAL SCHOOLS: ITEMS OF HISTORY; THEIR DEANS

California has three medical colleges rated as "Class A" by the Council on Medical Education and Hospitals of the American Medical Association. These are:

The Medical School of Stanford University, which carries on its preclinical work at Stanford, and its junior and senior courses in San Francisco;

The School of Medicine of the University of California, located at Berkeley and in San Francisco;

And the College of Medical Evangelists, which conducts its freshmen and sophomore years at Loma Linda, near Riverside, and its upper class work in Los Angeles.

* * *

The schools of the two noted universities of the North are the successors of pre-existing medical institutions in San Francisco:

Stanford University having taken over in 1908 the Cooper Medical College, which in turn had come into existence in 1882 through the union of the Medical College of the Pacific (established in 1872) and the medical department of the University of the Pacific (founded in 1858 by Dr. Elias Samuel Cooper);

And the University of California having taken over the Toland Hall College founded in 1862, the nominal affiliation with the University of California taking place in 1872, and the change into an active department of the state university being made in 1902.

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In southern California, the first undergraduate medical school to come into existence was founded in 1885 by the University of Southern California. Its sponsor and first dean was J. P. Widney, M. D., still living, who later became president of the University of Southern California. In July, 1909, this medical school, which had an affiliation with the University of Southern California similar to that of Toland Medical School with the University of California during the period 1872 to 1902, was absolved from its allegiance to the University of Southern California, and became a department of the University of California, continuing undergraduate medical teaching as such until 1914. In that year the department ceased its undergraduate work to give instruction only in clinical courses for graduates of medicine.

In 1903 another medical school, known as the College of Physicians and Surgeons, came into existence at Los Angeles, and in 1909 took the place of the former medical department of the University of Southern California, as just noted, and continued as such until the year 1920, when it suspended its work.

A third medical school came into existence in southern California in 1909 under the name of the College of Medical Evangelists, the institution being under the direct control of the Seventh Day Adventist denominational organization. Just as students in the North divide their time between Stanford and San Francisco, and Berkeley and San Francisco, so in the College of Medical Evangelists, which is the only undergraduate medical institution now existing in southern California, the students divide their time between Loma Linda, near Redlands, where the work of the first two years is carried on, and Los Angeles where provision for the junior and senior class work exists. In the news column of the Miscellany department of this issue is printed some further information concerning the College of Medical Evangelists, which in many ways is a somewhat unique institution and concerning which many members of the profession in California have only a rather limited knowledge.

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The surveys which have been made of medical institutions in the United States by the Rockefeller, the Carnegie, the A. M. A. and other organizations, have practically all stressed the desirability that at least three high grade medical schools should be located on the Pacific slope. The three cities mentioned as sites for such institutions were San Francisco, Los Angeles, and Portland.

At this time California has three "Class A" medical schools, namely, Stanford, the University of California, and the College of Medical Evangelists.

A group of colleagues in southern California have been agitating for some time the organization of an additional undergraduate medical institution, to be attached as a department of one of the universities represented in that section. What the outcome of these efforts will be is difficult to foretell, especially in these days when so tremendous an endowment is necessary if a high standard school is to be properly launched, and when